



Request for Replacement Award

Degree, Diploma or Certificate

Instructions:

1. Complete this form to request a replacement award certificate
2. Submit this form in person in T-2200, via US mail or using your STAR ID email as a PDF attachment to records.office@minneapolis.edu

Important:

- The name (or preferred name) that is currently on your student record will be used on your replacement award. To change the name on your student record, official documentation of the legal name change is required
- Awards are printed off-campus; therefore, you may not receive your replacement award for 6-8 weeks
- Once processed, you will receive an email with an official digital award credential and your formal physical award certificate will be mailed to your current address within 7-10 business days
- An official transcript may suit your purpose. To order an official transcript, please visit www.minneapolis.edu
- Award covers are available for purchase at the Minneapolis College bookstore or mctcbookstore.com
- Any overdue financial obligations to the College, must be resolved before your request can be processed
- **NOTE:** Minneapolis College **cannot duplicate** a certificate for **NURSING ASSISTANT** or **TRAINED MEDICAL ASSISTANT**, you must contact the Minnesota Department of Health for certification information

Student Information			
Last Name:	First Name:		
Please list ALL Previous Names:			Student or STAR ID #:
Current Street Address (this will be used to update your record):	City:	State:	Zip:
Email Address:	Phone:		
Please Select the College(s) Attended:			
<input type="checkbox"/> Minneapolis Community & Technical College (1996-Present) <input type="checkbox"/> Minneapolis Community College (Prior to 1996) <input type="checkbox"/> Minneapolis Technical College/ Minneapolis Technical Institute (Prior to 1996)			
Please Select the award(s) you would like to replace:			
<input type="checkbox"/> Associate in Arts (A.A) <input type="checkbox"/> Associate in Science (A.S.) <input type="checkbox"/> Associate in Applied Science (A.A.S.) <input type="checkbox"/> Associate in Fine Arts (A.F.A.) <input type="checkbox"/> Diploma <input type="checkbox"/> Certificate			
Major:	Major:		
Award Date:	Award Date:		
Student Signature			
Student Signature:			Date:
MCTC use only			
Initial Received: _____	<input type="checkbox"/> Verified Degree(s)	Initial: _____	
Date: _____	<input type="checkbox"/> Added to Order list	Date: _____	